

**REQUIRED DOCUMENTATION TO BE CONSIDERED FOR
ADDICTION TREATMENT SERVICES PROVIDERS –
OUTPATIENT CERTIFICATION 440 IAC 4.4**

A. Completed, signed and dated application for Certification as an *Addiction Treatment Services Provider* form (State Form 55376)

B. A copy of the applicant's policies/procedures for the following. Refer to the rule listed to find specifics that must be incorporated in the policies and procedures.

- Admission Criteria 440 IAC 4.4-2-4.5 (c)
- Consumer Intake Assessments 440 IAC 4.4-2-4.5 (d)
- Treatment Planning 440 IAC 4.4-2-4.5 (f)
- Consumer Progress 440 IAC 4.4-2-4.5 (h)
- Discharge Planning 440 IAC 4.4-2-4.5 (i)
- Consumer Rights IC 12-27
- Confidentiality 42 CFR 2

C. Documentation of Direct Services Providers, State Form 52810

D. Any and all existing waivers from DMHA

E. Statement of Understanding and Compliance with 440 IAC 4.4